

1-11-1

2

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------------|----------------------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | #8 | 21 JC-916 | 12/28/00 01-08-01 |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

| | | | |
|------------------------|------------|---------|--------------|
| ✓ | Rejected | N | Non-elected |
| = | Allowed | I | Interference |
| - (Through numeral)... | Canceled | A | Appeal |
| • | Restricted | O | Objected |

| Claim | Date |
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| Final | 2 7 14 12 |
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| Claim | Date |
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| Claim | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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